| PATER  | T APPLICATION F   | EE DETERMINA   | TION RECORD  | Irdonnetion unte         | Application        | valid OMB cont<br>valid OMB cont<br>x Dockel Humb   | MAVERCE<br>Sinumber. |
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| FOR  | (Column 1)  | (Column'2)   | LIAMS  | L ENTITY                 | OR·                | OTHER TH  | AN II                |
| 8IC FEF  | NUMBER FILED  | HUMBER EXTRA   | RATE (1)   | FEE (4)                  |                    |   |                      |
| URCH FEE   | <u> </u>  |  | _  |                          | <del>       </del> | (LE(t)  | EE (1)               |
| UMINATION FEE  | · · · · · · · · · · · · · · · · · · ·   | · .  |  |                          | .                  | <del></del>   |                      |
| XFR 1.16(0), (p), or (q)) AL CLAIMS  |   |  |  |                          |                    |   |                      |
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| -ICATION SIZE<br>FR 1.16(e))   | If the specification and c<br>sheets of paper, the app<br>is \$250 (\$125 for small e<br>additional 50 sheets or fi<br>35 U.S.C. 41(a)(1)(Q) ar | modion size fee due  |  |                          | ×                  |   |                      |
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| ip 10: Commission  | oner for Palents, P.O. Box 1.   | ox 1450, Alexandria, VA 2231   | 3-1450, DO NOT SEI<br>VA 22313-1450.   | ND FEES OR C             | DMPLETED FO        | DRMS TO THIS  |                      |

ll you head assistance in completing the form, call 1-800-PTO-9199 and select option 2.